### **APPLICATION DATA SHEET**

#### **Application Information**

Application Number:: Unassigned

Filing Date:: November 25, 2003

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

**Suggested Group Art Unit::** 

CD-ROM or CD-R?::

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form

(CFR)?::

Number of Copies of CFR::

Title:: APPARATUS FOR PRODUCING A BOUND PRINT

ITEM

Attorney Docket Number:: 40424-192744

Request for Early Publication?::

Request for Non-Publication?::

**Suggested Drawing Figure::** 

Total Drawing Sheets:: 2

Small Entity?:: No

**Latin Name::** 

**Variety Denomination Name::** 

Petition Included?::

**Petition Type::** 

Licensed US Govt. Agency::

**Contract or Grant Numbers::** 

**Secrecy Order in Parent Appl.::** 

# **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship::	Swiss
Country::	Switzerland
Status::	Full Capacity
Given Name::	Hanspeter
Middle Name::	
Family Name::	HEDIGER
Name Suffix::	
City of Residence::	Sempach Stadt
State or Province of Residence::	
Country of Residence::	Switzerland
Street of Mailing Address::	Alte Grenzstrasse 34
City of Mailing Address::	Sempach Stadt
State or Province of Mailing Address::	
Country of Mailing Address::	Switzerland
Postal or Zip Code of Mailing Address::	CH-6204
Applicant Authority Type::	Inventor
Primary Citizenship::	
Country::	
Status::	Full Capacity
Given Name::	•
Middle Name::	
Family Name::	
Name Suffix::	
City of Residence::	
State or Province of Residence::	
Country of Residence::	
Street of Mailing Address:	

City of Mailing Address::	
State or Province of Mailing Address:: Country of Mailing Address::	
Postal or Zip Code of Mailing Address::	
Applicant Authority Type::	Inventor
Primary Citizenship::	
Country::	
Status::	Full Capacity
Given Name::	
Middle Name::	
Family Name::	
Name Suffix::	
City of Residence::	
State or Province of Residence::	•
Country of Residence::	
Street of Mailing Address::	
City of Mailing Address::	
State or Province of Mailing Address:: Country of Mailing Address::	
Postal or Zip Code of Mailing Address::	
Applicant Authority Type::	Inventor
Primary Citizenship::	
Country::	
Status::	Full Capacity
Given Name::	
Middle Name::	
Family Name::	

Name Suffix::				
City of Residence::				
State or Province of	Residence::			
Country of Residence	e::			
Street of Mailing Add	iress::			
City of Mailing Addre	ess::			
State or Province of Address:: Country of Mailing A	•			
Postal or Zip Code o Address::	f Mailing			
Correspondence	Information			
Correspondence Cus Number::	stomer 26694	ļ		
Phone Number::	202 344-4000			
Fax Number::		202 344-8300		
E-Mail Address::	rkinb	erg@venable.com		
Representative In	formation			
Representative Cust Number::	omer 26694	Į.		
Domestic Priority	Information			
Application::	Continuity Type::	Parent Application::	Parent Filing Date::	
	Continuation of			
	Continuation of			

**Continuation of** 

Continuation of

## **Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
Europe	02406039.4	November 29, 2002	Yes

### **Assignee Information**

**Assignee Name::** 

MÜLLER MARTINI HOLDING AG

**Street of Mailing Address::** 

Sonnenbergstrasse 13

**City of Mailing Address::** 

Hergiswil

State or Province of Mailing

Address::

**Country of Mailing Address::** 

Switzerland

Postal or Zip Code of Mailing

CH-6052

Address::